


2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
Apr 29, 2008 08:00 AM
Secretary of State

DOCUMENT # A99000001422

1. Entity Name
 DI LIDO BEACH RESORT, LTD.



Principal Place of Business
 605 LINCOLN ROAD
 MIAMI BEACH, FL 33139

Mailing Address
 605 LINCOLN ROAD
 MIAMI BEACH, FL 33139

DO NOT WRITE IN THIS SPACE



02122008 No Chg-LP CR2E003 (12/06)

4. FEI Number 65-0969875	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

LAZAR, BRUCE E
 605 LINCOLN ROAD
 MIAMI BEACH, FL 33139

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$500.00
After May 1, 2008, Fee will be \$900.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION	
DOCUMENT #	P99000074985
NAME	FLAG DI LIDO OPERATING CORP.
STREET ADDRESS	1221 BRICKELL AVENUE
CITY-ST-ZIP	MIAMI, FL 33131
DOCUMENT #	P99000076876
NAME	LIONSTONE DI LIDO GP, INC.
STREET ADDRESS	605 LINCOLN ROAD
CITY-ST-ZIP	MIAMI BEACH, FL 33139
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
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DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000931662
 05/22/08-80023-015 500.00

DO NOT WRITE IN THIS SPACE

STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: *Bruce E. Lazar* **BRUCE E. LAZAR**
 VP LIONSTONE DI LIDO GP INC
 MANAGING PARTNER 4/22/08 305532-1215

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #